

RECEIVED  
CENTRAL FAX CENTER

JUL 11 2007

**Nixon Peabody LLP**  
Attorneys at Law

100 Summer Street  
Boston, MA 02110-2131  
(617) 345-1000

Fax: (617) 345-1300

**PRIVILEGE AND CONFIDENTIALITY NOTICE**  
The information in this fax is intended for the named recipients only. It contains privileged and confidential matter. If you have received this fax in error, please notify us immediately by a collect telephone call to (617) 345-1000 and return the original to the sender by mail. We will reimburse you for postage. Do not disclose the contents to anyone. Thank you.

**FAX**

To:	Company	Fax #:	Telephone #:
US PTO	United States Patent and Trademark Office	1-571-273-8300	

INTERNATIONAL PHONE NUMBERS MUST INCLUDE COUNTRY & CITY CODE. SEE LOCAL WHITE PAGES FOR CODES NEEDED.

From: Mark J. FitzGerald	Date: July 11, 2007	No. of Pages: 6 (including this page)	046264-065323
--------------------------	---------------------	--	---------------

Practitioner's Docket No. 046264-065323 PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Vladimir I. Slepnev  
 Application No.: 10/719,185  
 Filed: November 21, 2003  
 For: SAMPLING METHOD AND APPARATUS FOR AMPLIFICATION  
 REACTION ANALYSIS

Group No.: 1637  
 Examiner: Horlick, Kenneth R.

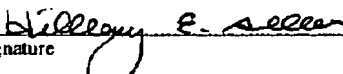
**CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. § 1.8(a) and 1.10)**

I hereby certify that this correspondence:

1. Facsimile Cover Sheet (1 pg.);
2. Certificate of Facsimile (1 pg.);
3. Transmittal Form (1 pg.);
4. Revocation of Power of Attorney (1 pg.);
5. Power of Attorney (1 pg.); and
6. Statement Under 3.73b (1 pg.).

is on the date shown below being transmitted by facsimile to the Patent and Trademark Office at (571) 273-8300.

Date: July 11, 2007

  
 Signature  
 Hillary E. Allan  
 (type or print name of person certifying)

Original of the transmitted document will be sent by:

☐ First Class Mail

☐ Overnight Mail

☐ Hand Delivery

☒ This transmission will be the only form of delivery of this document

**IF YOU DO NOT RECEIVE ALL OF THESE PAGES, PLEASE CONTACT THE FAX OPERATOR AS SOON AS POSSIBLE AT: (617) 345-1300. THANK YOU.**

CONFIRMATION: DATE SENT \_\_\_\_\_ TIME \_\_\_\_\_ BY \_\_\_\_\_

RECEIVED  
CENTRAL FAX CENTER

JUL 11 2007

Practitioner's Docket No. 046264-065323

PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Vladimir I. Slepnev  
Application No.: 10/719,185      Group No.: 1637  
Filed: November 21, 2003      Examiner: Horlick, Kenneth R.  
For: SAMPLING METHOD AND APPARATUS FOR AMPLIFICATION  
REACTION ANALYSIS

## CERTIFICATE OF FACSIMILE (37 C.F.R. § 1.8)

I hereby certify that this correspondence:

1. Facsimile Cover Sheet (1 pg.);
2. Certificate of Facsimile (1 pg.);
3. Transmittal Form (1 pg.);
4. Revocation of Power of Attorney (1 pg.);
5. Power of Attorney (1 pg.); and
6. Statement Under 3.73b (1 pg.).

is on the date shown below being:

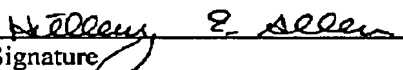
## MAILING

deposited with the United States Postal Service  
sufficient postage as first class mail in an  
envelope addressed to the Commissioner  
for Patents, P.O. Box 1450, Alexandria, VA  
22313-1450

## FACSIMILE

X transmitted by facsimile to the Patent with  
and Trademark Office at (571) 273-  
8300.

Date: July 11, 2007

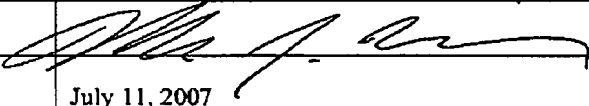
  
Signature

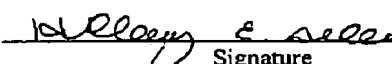
Hillary E. Allan  
(type or print name of person certifying)

RECEIVED  
CENTRAL FAX CENTER

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/719,185
		Filing Date	November 21, 2003
		First Named Inventor	Vladimir I. Slepnev
		Group Art Unit	1637
		Examiner Name	Horlick, Kenneth R.
Total Number of Pages in This Submission	6	Attorney Docket Number	046264-065323

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input checked="" type="checkbox"/> Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fax Cover Page (1 pg.); Certificate of Facsimile (1 pg.); and Statement Under 3.73b (1 pg.).
Remarks	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50-0850 for the above identified docket number.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Mark J. FitzGerald (Reg. No. 45,928)
Signature	
Date	July 11, 2007

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]	
I hereby certify that this correspondence is being:	
<input type="checkbox"/> deposited with the United States Postal Service on the date shown below with sufficient postage as First Class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450	
<input checked="" type="checkbox"/> transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (571) 273-8300.	
July 11, 2007 Date	 Signature Hillary E. Allan Typed or printed name

10649839.1

<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/719,185
	Filing Date	November 21, 2003
	First Named Inventor	Vladimir I. Slepnev
	Group Art Unit	1637
	Examiner Name	Horlick, Kenneth R.
	Attorney Docket Number	046264-065323

RECEIVED  
CENTRAL FAX CENTER

JUL 11 2007

I hereby revoke all previous powers of attorney given in the above-identified application.

☒ A Power of Attorney is submitted herewith.

OR

☐ I hereby appoint the practitioners associated with the Customer Number:

☐ Please change the correspondence address for the above-identified application to:

☐ The address associated with  
Customer Number:

OR

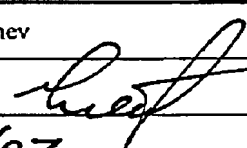
<input checked="" type="checkbox"/> Firm or Individual Name	Mark J. FitzGerald (Reg. No. 45,928) / Nixon Peabody LLP					
Address	100 Summer Street					
Address						
City	Boston	State	MA	ZIP	02110-2131	
Country	USA					
Telephone	617-345-1058	Fax	617-345-1300			

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)*

**SIGNATURE of Applicant or Assignee of Record**

Name	Vladimir I. Slepnev
Signature	
Date	07/01/07

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see blow\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

<b>POWER OF ATTORNEY OR AUTHORIZATION OF AGENT</b>	Application Number	10/719,185
	Filing Date	November 21, 2003
	First Named Inventor	Vladimir I. Slepnev
	Group Art Unit	1637
	Examiner Name	Horlick, Kenneth R.
	Attorney Docket Number	046264-065323

RECEIVED  
CENTRAL FAX CENTER  
JUL 11 2007

I hereby appoint:

☐ Practitioners at Customer Number   
OR

Place Customer  
Number Bar Code  
Label here

☒ Practitioner(s) named below

Name	Registration Number
Ronald I. Eisenstein	30,628
David S. Resnick	34,235
Mark J. FitzGerald	45,928
Leena H. Karttunen	60,335
Stephen R. Duly	56,183
Candace M. Summerford	58,109
Shayne Huff	44,784
Jill Uhl	43,213

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number  
OR


☐ Practitioners at Customer Number   
OR

<input checked="" type="checkbox"/> Firm or Individual Name	Mark J. FitzGerald (Reg. No. 45,928) / Nixon Peabody LLP				
Address	100 Summer Street				
Address					
City	Boston	State	MA	Zip	02110-2131
Country					
Telephone	617-345-1058	Fax	617-345-1300		

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
**SIGNATURE of Applicant or Assignee of Record**

Name	Vladimir I. Slepnev
Signature	
Date	07/01/07

NOTE: Signatures of all the inventors or assignees of record of the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of \_\_\_\_\_ forms are submitted.

PTO/SB/96 (08-00)

Approved for use through 10/31/2002 OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**STATEMENT UNDER 37 CFR 3.73(b)****RECEIVED  
CENTRAL FAX CENTER**Applicant/Patent Owner: Primera Biosystems, Inc.Application No./Patent No.: 10/719,185Filed/Issue Date: November 21, 2003 **JUL 11 2007**Entitled: SAMPLING METHOD AND APPARATUS FOR AMPLIFICATION REACTION ANALYSISPrimera Biosystems, Inc.a Corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.  
The extent (by, percentage) of its ownership interest is \_\_\_\_\_%

in the patent application/patent identified above by virtue of either:

- A. ☐ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

OR

- B. ☒ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: Vladimir I. Slepnev To: Sention, Inc.  
The document was recorded in the United States Patent and Trademark Office at Reel 014495, Frame 0772, or for which a copy thereof is attached.
2. From: Sention, Inc. To: Primera Diagnostics, Inc.  
The document was recorded in the United States Patent and Trademark Office at Reel 017309, Frame 0447, or for which a copy thereof is attached.
3. From: Primera Diagnostics, Inc. To: Primera Biosystems, Inc.  
The document was recorded in the United States Patent and Trademark Office at Reel 017196, Frame 0284, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

07/01/07  
DateVladimir I. Slepnev  
Typed or printed name

Signature

Chief Scientific Officer  
Title

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

10635688.1